

2.8

**Exterior Lighting**

**Application Form**

Legal description: Village \_\_\_\_ Lot \_\_\_\_ Blk \_\_\_\_ Sec \_\_\_\_  
Address: \_\_\_\_\_  
Owner: \_\_\_\_\_  
Phone (Res): \_\_\_\_\_ (Day): \_\_\_\_\_  
Fax: \_\_\_\_\_ Other phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Estimated Start Date: \_\_\_\_\_  
Contractor Company Name: \_\_\_\_\_  
Contractor's Phone: \_\_\_\_\_  
Contractor's Address: \_\_\_\_\_  
Contractor's E-mail: \_\_\_\_\_

**HOW TO APPLY**

1. Complete and sign this application.
2. Provide brochures, drawings, or photographs of the lights.
3. Attach a copy of your property survey noting to scale the location of the proposed lights.
4. Attach a copy of your plan and elevation drawings. They should be to scale and include dimensions. To speed processing, provide as much information as possible.
5. Please visit our web site to check the posted agendas of the Plan Review Committee meetings at [thewoodlandstowship-tx.gov](http://thewoodlandstowship-tx.gov). Submission **does not** guarantee posting on the upcoming agenda.

Gray Area For Office Use	APPLICANT INFORMATION - PLEASE PROVIDE THE FOLLOWING:
	Are any trees over 6 inches in diameter as measured 2 feet from the ground proposed for removal? <b>(yes/no)</b> If yes, how many? _____. Please indicate the location of the trees on the property survey.
	Lighting Specifications: Type of Light(s) (circle all that apply): Ground lights, pole light, building light, tree light, landscape, other _____.
	Lamp Type ( <b>circle all that apply</b> ): Incandescent, natural gas, fluorescent, tungsten halogen, electronic insect trap, mercury vapor, other _____.
	Type of fixture ( <b>circle all that apply</b> ): Spotlight, globe light, box light, cone light, other _____ Describe _____ fully (including _____ color _____ of fixture): _____.
	Total number or lights proposed? _____ Indicate the type, watts & volts for each light: 1. type _____ watts _____ volts _____ 2. type _____ watts _____ volts _____ 3. type _____ watts _____ volts _____ 4. type _____ watts _____ volts _____
	Will the lights be installed with shields directed downward as to prevent glare or an inappropriate level of illumination outside the lot? <b>(yes/no)</b> Explain: _____

**OWNER CERTIFICATION AND HOLD HARMLESS AGREEMENT**

1. The information set out above and included with this Application is accurate and complete.
2. The improvements will be completed in accordance with the approved application.
3. The improvements will not affect existing surface water flows at the lot boundaries.
4. Agents or employees of the Woodlands Township have my permission to enter the property during normal business hours to inspect construction of the improvements.
5. Construction is not to begin until approval has been received from the Plan Review Committee

Owner understands that the Township does not review plans for compliance with applicable laws or codes, and that it is the duty of the owner and the owner's contractors or consultants to design and construct the proposed improvements according to applicable laws, codes and sound practices. Owner hereby releases and agrees to hold The Woodlands Township, The Development Standards Committee, and their agents and employees harmless from any cost or liability arising out of the review or approval of plans for the proposed improvements.

\_\_\_\_\_  
Owner Signature Date

\_\_\_\_\_  
Contractor Signature (optional) Date

**NOTE: Construction must be completed within 120 days of Plan Approval**

(For Office Use Only)

**Staff Approval Verification**

\_\_\_\_\_  
*Date*                      *Int.*      *Int.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Committee Action** \_\_\_\_\_  
(date)

\_\_\_\_ Approved      \_\_\_\_ Deferred  
\_\_\_\_ Conditionally Approved      \_\_\_\_ Returned  
\_\_\_\_ Disapproved

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Supplemental Action** \_\_\_\_\_  
(date)

\_\_\_\_ Approved      \_\_\_\_ Deferred  
\_\_\_\_ Conditionally Approved      \_\_\_\_ Returned  
\_\_\_\_ Disapproved

\_\_\_\_\_  
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